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## \*BIBDATASHEET\*

CONFIRMATION NO. 1073

Bib Data Sheet

|                             |                                       |              |                        |                                       |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------------|
| SERIAL NUMBER<br>10/698,712 | FILING DATE<br>10/31/2003<br><br>RULE | CLASS<br>623 | GROUP ART UNIT<br>3738 | ATTORNEY<br>DOCKET NO.<br>491,920-033 |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------------|

APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
 This application is a CIP of 10/447,453 05/28/2003

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 03/10/2004

|                                                             |                                                                                                                                                                                           |                           |                         |                       |                            |
|-------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|-------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>All rights reserved | STATE OR<br>COUNTRY<br>CA | SHEETS<br>DRAWING<br>11 | TOTAL<br>CLAIMS<br>49 | INDEPENDENT<br>CLAIMS<br>4 |
|-------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|-------------------------|-----------------------|----------------------------|

Verified and Acknowledged  
 Examiner's Signature: *[Signature]* Initials: *[Initials]*

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TITLE  
 Textured and drug eluting coronary artery stent

|                                   |                                                                                                                   |                                                                                                                                                                                                                                              |
|-----------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FILING FEE<br><br>RECEIVED<br>989 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____ |
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